PTO/SB/05 (05-03)

Approved for use through 04/30/2003. OMB 0651-0032

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UTILITY		Attorney Docket No.	2878						
PATENT APPLICATION		First Inventor	David S. Keppel						
TRANSMITTAL		Title	Variable Output Crest Factor Electrosurgical Generator						
(Only for new	nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.	ET 710030111 US						
	APPLICATION ELEMENTS oter 600 concerning utility patent application contents.	ADDRESS TO:	Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria VA 22313-1450	510					
(Submit an Applicant See 37 CI 3. Specificat (preferred a - Descriptiv - Cross Ref - Statemen - Reference or a comp - Backgrou - Brief Sum - Brief Dess - Detailed D - Claim(s) - Abstract c 4. Drawing(s 5. Oath or Declara a . Newty b. Copy fine (for colimits) i. DE Sign nam 1.63	ion [Total Pages 16] arrangement set forth below) re title of the invention ference to Related Applications at Regarding Fed sponsored R & D e to sequence listing, a table, buter program listing appendix and of the Invention arrany of the Invention cription of the Drawings (if filed) Description of the Disclosure as) (35 U.S.C. 113) [Total Sheets 2 ]	S. Nucleotide and/or Au (if applicable, all nec- a. Computer b. Specificat i. CD- ii. Pap c. Statemen ACCOMPAN  9. Assignment P 10. 37 CFR 3.73(i (when there is 12. Information Di Statement (ID 13. Preliminary Ar 14. Return Receip (Should be sp 15. Certified Copy (if foreign prio Nonpublication (b)(2)(B)(i). Ag	Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Reader Form (CRF)  b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1499 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed)						
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:									
Continuati			or application No.:						
Prior application information: Examiner Art Unit:									
	19. CORRESPONI	DENCE ADDRESS							
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here)  OR  Correspondence address below									
Name	Douglas E. Denninger, Esq.								
	U.S. Surgical, A Division of Tyco Healt	hcare Group, LP							
	150 Glover Avenue Norwalk	State Connecticut	Zip Code   06856						
Country		lephone 203-845-48		66					
Name (Print/Type)	Douglas E. Denninger	Registration No. (Attorney	//Agent) 31,752						
Signature	Ch. Oems		Date 12/4/0	3					

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number ET 7100301111

addressed to: Mail Stop Patent Application, Commissioner for Batents, P.O. Box 1450,

Dated:



Recording each patent assignment per

property (times number of properties)

Filing a submission after final rejection

Request for Continued Examination (RCE)

SUBTOTAL (3) (\$)0.00

For each additional invention to be examined (37 CFR 1.129(b))

Request for expedited examination

(37 ČFR 1,129(a))

of a design application

Approved for use through 10/31/2002. OMB 0651-0032
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FEE TRANSMITTAL for FY 2003			Complete if Kn wn					
			Application Number		er To Be Assigned			
			Filing Date		Concurrently Herewith			
		First Named Inventor		d Inve	ntor David S. Keppel			
Patent fees are subject to annual revision.			Examiner Name		Unassigned			
Applicant claims small entity status. See 37 CFR 1.27			Art Unit		Unassigned			
TOTAL AMOUNT OF PAYMENT (\$) 852.00			Attorney Docket No.		No. 2878			
METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)					
Check Credit card Money Other None	3. <i>A</i>	3. ADDITIONAL FEES						
Deposit Account:			Large Entity   Small Entity					
Deposit 04.0550	Fee Code	Fee e (\$)	Fee Code	Fee (\$)	Fee Description Fee Paid			
Account Number 21-0550	1051	130	2051	65	Surcharge - late filing fee or oath			
Deposit Account United States Surgical	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet			
Name The Commissioner is authorized to: (check all that apply)		130	1053	130	Non-English specification			
The Commissioner is authorized to: (check all that apply)  Charge fee(s) indicated below  Credit any overpayments		2,520	1812	2,520	For filing a request for ex parte reexamination			
Charge any additional fee(s) during the pendency of this application			1804	920*	Requesting publication of SIR prior to Examiner action			
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1,840	1805	1,840°	1i			
FEE CALCULATION			2251	55	Extension for reply within first month			
1. BASIC FILING FEE		400	2252	200	Extension for reply within second month			
Large Entity Small Entity	1253	920	2253	460	Extension for reply within third month			
Fee Fee Fee Fee Fee Description Fee Paid Code (\$)	1254	1,440	2254	720	Extension for reply within fourth month			
1001 740 2001 370 Utility filing fee 750.00	1255	1,960	2255	980	Extension for reply within fifth month			
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Appeal			
1003 510 2003 255 Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal			
1004 740 2004 370 Reissue filing fee	1403			140	Request for oral hearing			
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding			
SUBTOTAL (1) (\$)750.00	1452	110	2452	55	Petition to revive - unavoidable			
12 FYTRA CLAIM FEES FOR LITH ITY AND REISSHE!		1,280	2453		Petition to revive - unintentional			
Fee from		1,280	2501		Utility issue fee (or reissue)			
Extra Claims below Fee Paid  Total Claims 21 .20** = 1 x 18.00 = 18.00	1502 1503		2502 2503	230 310	Design issue fee Plant issue fee			
Independent Claims 4 - 3** = 1 x 84.00 = 84.00	1460		1460	130	Petitions to the Commissioner			
Multiple Dependent			1807	50	Processing fee under 37 CFR 1.17(q)			
Large Entity   Small Entity			1806	180	Submission of Information Disclosure Stmt			
Fee Fee Fee Fee Description	1806		I	.50				

**or number previ	ously paid, if greater; For Reissues, see abov	SUBTOTAL (3) (\$)0.00			
SUBMITTED BY			(Complete	(if applicable)	
Name (Print/Type)	Douglas E. Denninger	Registration No. (Attorney/Agent) 31,752	Telephone	203-845-4286	
Signature	(Q-Qomas		Date	12/4/03	

8021

1809 740

1810 740

1802 900

Other fee (specify)

1801 740

40

8021

2809

2810

2801

1802

\*Reduced by Basic Filing Fee Paid

40

370

Code (\$)

1203 280

18

84

84

18

1202

1201

1204

1205

Code (\$)

2201 42

2203 140

9

9

SUBTOTAL (2)

Claims in excess of 20

over original patent

and over original patent

Independent claims in excess of 3

\*\* Reissue independent claims

\*\* Reissue claims in excess of 20

(\$) 102.00

Multiple dependent claim, if not paid

2202

2204 42

2205

WARNING: Information of this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

Docket: 2878

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

David S. Keppel

Examiner:

To Be Assigned

Group Art Unit: To Be Assigned

Serial No:

To Be Assigned

Filed: Concurrently Herewith

For:

VARIABLE OUTPUT CREST FACTOR ELECTROSURGICAL GENERATOR

## **CERTIFICATE OF EXPRESS MAILING**

"Express Mail" Mailing Label No.; ET 710030111 US Date of Deposit: Dec. 4, 2003

I hereby certify that the following:

- [x] This Certificate of Express Mailing
- [x] Utility Patent Application Transmittal
- [x] Fee Transmittal
- [x] A patent application consisting of <u>16</u> pages of abstract, specification and claims
- [x] 2 sheets of 例 formal [深] informal drawings
- [x] Return postcard

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR Section 1.10 on the Date of Deposit indicated above in an envelope addressed to the Mail Stop Patent Application, Commissioner for Patents, P.Q., box 1/450, Alexandria, VA 22313-1450.

Vanessa M. Rosado

United States Surgical, a division of TYCO HEALTHCARE GROUP LP 150 Glover Avenue Norwalk, CT 06856 (203) 845-1172